



bridgeMLS Membership Form
Changing Office Information

Agent Name: \_\_\_\_\_ User ID: R \_\_\_\_\_

NEW OFFICE INFORMATION

Effective Date: \_\_\_\_\_ Office Name: \_\_\_\_\_

Office Mailing Address: \_\_\_\_\_
Street # Street Name Suite #

City State Zip

Office Phone: \_\_\_\_\_ Fax #: \_\_\_\_\_

NEW BROKER

Name: \_\_\_\_\_ User ID: R \_\_\_\_\_

Signature Required: \_\_\_\_\_ Date: \_\_\_\_\_

OLD OFFICE INFORMATION Required

Office Name: \_\_\_\_\_ Office City: \_\_\_\_\_

Broker Name: \_\_\_\_\_ Broker ID: R \_\_\_\_\_

Office Phone # \_\_\_\_\_ Fax #: \_\_\_\_\_

PERSONAL INFORMATION Fill in even if there are no changes

Home Address: \_\_\_\_\_
Street # Street Name Unit #

City State Zip

Cell phone: \_\_\_\_\_ Preferred communication from Bridge: Email only Text Only Both

Email: \_\_\_\_\_ Web Page: \_\_\_\_\_

Office Use Only

New Service Center: \_\_\_\_\_ Name Date to Add New Member

Agent Code \_\_\_\_\_ Office Code \_\_\_\_\_ Security Level \_\_\_\_\_